PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 10/783862 694231/0090

								0 1 12 31 1 0 1 0					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OF.		R THAN ENTITY	
TOTAL CLAIMS			27					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FEI	385.00	OR		 	
T	OTAL CHARGE	ABLE CLAIMS	27 minus 20=		. 7] .	XS 9=		OR	XS18=	126	
INDEPENDENT CLAIMS			3 "	ninus 3 =	. 0			X43=		OR	X86=	750	
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT					-145=	·	1	-290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							١ ا	TOTAL		OR		296.	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	عمرين	
		(Column 1)	. (Column 2)			(Column 3)	<u> </u>	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 27	Minus	-2	7	= /]	XS 9=		OR	X\$18=		
AME	Independent	· 3	Minus	3	<u> </u>	-/	[X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENI	CLAIM		֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֡֓֓֓	+145=		OR	+290≖		
	•						L	TOTAL		OR	TOTAL		
ADDIT FEE (Column 1) (Column 2) (Column 3)											ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		z		X\$ 9=		OR	X\$18=		
	Incependent	•	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	PENDENT	CLAIM		!	+145=		OR	+290=	•	
							A	TOTAL DIT. FEE		L	TOYAL DDIT. FEE	•	
	`	(Column 1) CLAIMS		(Columi HIGHE:	1·2) ST	(Column 3)		:	·	_	· · ·		
MEN		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA			ADDI- TONAL FEE	.	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= .	Γ	X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	r	X43=		F	X86=		
	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		OR			
• 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
H	" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
· T	he "Highest Numi	ber Previously Paid	For (Total or	Independent) is the I	nighest number	tound	in the appr	opriate box	in colu	mn 1.	ŀ	